

6P 3732

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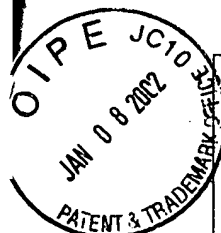
PTO/SB/21 (08-00)

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TRANSMITTAL FORM

(To be used for all correspondence after initial filing)

Application Number	09/828,601
Filing Date	April 6, 2001
First Named Inventor	Steven L. Eikenberg
Group Art Unit	3732
Examiner Name	
Attorney Docket No.	920070.411

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ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement; Form PTO-1449 <input type="checkbox"/> Cited References <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts under 37 C.F.R. 1.52 or 1.53 <input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Request for Corrected Filing Receipt <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Declaration <input type="checkbox"/> Statement under 37 CFR 3.73(b) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> CD(s), Number of CD(s) _____ <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Return Receipt Postcard <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below): <u>Request to Rescind Previous</u> <u>Non-Publication Request</u>
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Remarks

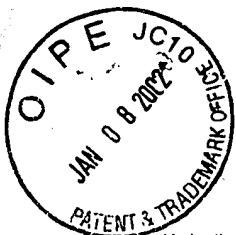
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Individual Name	Dale R. Cook	 00500 PATENT TRADEMARK OFFICE
Signature		
Date	January 8, 2002	

CERTIFICATE OF EXPRESS MAILING

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Date:	January 8, 2002



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PTO/SB/36 [11-00]

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REQUEST TO RESCIND PREVIOUS NONPUBLICATION REQUEST 35 U.S.C. 122(b)(2)(B)(ii)	Application Number	09/828,601
	Filing Date	April 6, 2001
	First Named Inventor	Steven L. Eikenberg
	Title	EASY ACCESS DENTAL FIELD OPERATING AND TREATMENT SYSTEM HAVING OVER-THE- PATIENT DELIVERY
	Attorney Docket Number	920070.411
	Group Art Unit	3732
	Examiner	

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I hereby **rescind** the previous request that the above-identified application not be published under 35 U.S.C. 122(b).

January 8, 2002

Date

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Dale R. Cook

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This request must be signed in compliance with 37 CFR 1.33(b).

Burden Hour Statement: This collection of information is required by 37 CFR 1.213(b). The information is used by the public to rescind a previously filed request that an application not be published under 35 U.S.C. 1.22(b) (and the PTO to process that rescission). Confidentiality is governed by 35 U.S.C. 122 and 37 C.F.R. 1.14. This form is estimated to take 6 minutes to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.